

TRANSMISSION FORM

ECF 9-13-04

District Court: SD of Ohio (Western Division)	APPEAL INFORMATION to be completed by the Sixth Circuit Court of Appeals Case No: 04-4241 Case Manager: MICHELLE DAVIS
District Court Case No: 1:01-cv-284	
SHORT CAPTION	
*Darlington Amadasu	
Plaintiff/Petitioner vs. Health Alliance of Greater Cincinnati, et al	Date Filed: FILED OCT 13 2004 LEONARD GREEN, Clerk
Defendant/Respondent PO Box 6263 Cincinnati, OH 45202 *provide pro se address IF NOT on the docket sheet	
District Court Judge: Diott	
Court Reporter(s): Betty Schwab	
From Deputy Clerk: Kendra Jordan	Anything That Needs Special Attention Judicial Notice by Plaintiff as of Right to Non-Payment of Fees (Doc.92)
Date: 9-9-04	
\$255.00 Appeal Filing Fee Paid? NO <i>[initials]</i>	
<p align="center">RECORD TRANSMISSION</p> <p>I hereby certify that I have transmitted to the United States Court of Appeals for the Sixth Circuit the annexed documents consisting of:</p> <p>Pleading(s) (including the pre-sentence report psi) _____ Volume(s)</p> <p>Deposition(s) _____ Volume(s) Exhibit(s) _____ Volume(s)</p> <p>Transcript(s) _____ Volume(s) Sealed _____ Volume(s)</p> <p>**Please indicate if this is a supplemental record:</p> <p>which constitutes the CERTIFIED RECORD ON APPEAL, this</p> <p>Clerk: <u>James Bonini</u> United States District Court</p>	